PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

are required to respond to a collection of information unless it displays a valid OMB control number Under the Paperwork Reduction

| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  |                        |                      |                | Complete if Known     |                |                          |                 |                          |    |
|---|------------------------|----------------------|----------------|-----------------------|----------------|--------------------------|-----------------|--------------------------|----|
|   |                        |                      |                | Application Nu        | umber          | 10/007,789               |                 | <del></del> -            |    |
|   |                        |                      |                | Filing Date           |                | 11/07/2001               |                 |                          |    |
| For FY 2005   |                        |                      | First Named Ir | nventor               | Lee            |                          |                 |                          |    |
| Applicant claims small entity status. See 37 CFR 1.27   |                        |                      | Examiner Nan   | ne                    | Beatriz Prieto |                          |                 |                          |    |
|   |                        |                      |                |                       |                | 2142                     |                 |                          |    |
| TOTAL AMOUNT  | UP PAYMENT             | (\$)                 | 225            | Attomey Dock          | et No.         | 308,972                  |                 |                          |    |
| METHOD OF PAYMENT (check all that apply)  |                        |                      |                |                       |                |                          |                 |                          |    |
| ✓ Check Credit Card Money Order None Other (please identify):   |                        |                      |                |                       |                |                          |                 |                          |    |
| Deposit Account Deposit Account Number: 01-0035 Deposit Account Name: ABELMAN, FRAYNE&SCHWAB  |                        |                      |                |                       |                |                          |                 |                          |    |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |                        |                      |                |                       |                |                          |                 |                          |    |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  |                        |                      |                |                       |                |                          |                 |                          |    |
| ☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments   |                        |                      |                |                       |                |                          |                 |                          |    |
| under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card |                        |                      |                |                       |                |                          |                 |                          |    |
| Information and authorization on PTO-2038.  |                        |                      |                |                       |                |                          |                 |                          |    |
| FEE CALCULA   |                        |                      | <del></del>    |                       |                |                          |                 |                          |    |
| 1. BASIC FILIN  | IG, SEARCH, A          | ND EXAMIN            | ATION FEES     | סטן בבבט              | EVAL           | IINIATION                | EEEe            |                          |    |
|   |                        | NG FEES<br>Small Ent |                | RCH FEES Small Entity |                | IINATION<br><u>Small</u> |                 |                          |    |
| Application T   |                        | \$) <u>Fee (\$)</u>  | Fee (\$        | Fee (\$)              | Fee            | (\$) Fee                 | (\$)            | Fees Paid (              | រា |
| Utility   | 300                    | 150                  | 500            | 250                   | 200            |                          | )               | 0                        | _  |
| Design  | 200                    | 100                  | 100            | 50                    | 130            | 6:                       | 5               | 0                        | -  |
| Plant   | 200                    | 100                  | 300            | 150                   | 160            | _                        | )               | 0                        | -  |
| Reissue   | 300                    | 150                  | 500            | 250                   | 600            | 300                      | 0               | 0                        | _  |
| Provisional   | 200                    | 100                  | 0              | 0                     | 0              | ) (                      | 0               | 0                        | -  |
| 2. EXCESS CL  |                        |                      |                |                       |                | F                        | se (\$)         | Small Entity<br>Fee (\$) |    |
| Fee Description   |                        | ng Reissues)         |                |                       |                | <u> </u>                 | 50              | 25                       |    |
| Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)  |                        |                      |                |                       |                |                          | 200             | 100                      | l  |
|   | endent claims          |                      |                |                       | 360            | 180                      |                 |                          |    |
| Total Claims  |                        | Claims F             | Fee (\$) Fe    | e Paid (\$)           |                |                          |                 | endent Claims            | l  |
|   | 0 or HP = 0            |                      | =_=_           |                       |                | <u> </u>                 | ee (\$ <u>)</u> | Fee Paid (\$)            |    |
| HP = highest nur<br>Indep. Claims   | nber of total claims p |                      |                | e Paid (\$)           |                |                          |                 | 0                        | -  |
| 3 -3  | or HP = (              | ) x                  |                | 0                     |                |                          |                 |                          |    |
| HP = highest number of independent claims paid for, if greater than 3.  |                        |                      |                |                       |                |                          |                 |                          |    |
| 3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer                        |                        |                      |                |                       |                |                          |                 |                          |    |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50   |                        |                      |                |                       |                |                          |                 |                          |    |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).   |                        |                      |                |                       |                |                          |                 |                          |    |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof 50 - 100 = 0 / 50 = 0 (round up to a whole number) x = 0                               |                        |                      |                |                       |                |                          |                 |                          |    |
| 4. OTHER FEE(S)  Fees Paid (\$)   |                        |                      |                |                       |                |                          |                 |                          |    |
| _   | -                      |                      |                |                       |                |                          |                 | 0                        |    |
| Other (e.g., late filing surcharge): Two month extension of time \$ 225   |                        |                      |                |                       |                |                          |                 |                          |    |
| SUBMITTED BY  |                        |                      |                |                       |                |                          |                 |                          |    |
| Signature   |                        | -                    | ļ              | Registration No       | 36 223         |                          | Telephone       | 212-949-9022             |    |

| SUBMITTED BY<br>Signature | 1000              | Registration No.<br>(Attorney/Agent) 36,223 | Telephone 212-949-9022 |
|---------------------------|-------------------|---|------------------------|
| Name (Print/Type)         | Anthony J. Natoli |   | Date 09/05/2006        |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Lee et al.

Examiner:

**Beatriz Prieto** 

1-06 IFM

Application Number: 10/007,789

Art Unit:

2142

Filing Date:

November 7, 2001

Title:

ONLINE SYSTEM AND METHOD FOR DYNAMIC SEGMENTATION AND CONTENT PRESENTATION

STATEMENT OF FILING BY EXPRESS MAIL 37 C.F.R. SECTION 1.10

This correspondence is being deposited with the United States Postal Service on September 5, 2006 in an envelope as "Express Mail Post Office to Addressee" Mail Label Number ER 059 676 207 US addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

> PETITION FOR A TWO-MONTH EXTENSION OF TIME PURSUANT TO 37 C.F.R. § 1.136(a)

We request that the three-month response term to the outstanding office action dated April 10, 2006 in the above-captioned application be extended two months from July 10, 2006 to September 10, 2006. We enclose a check for the requisite small entity fee of \$ 225. Please charge any additional fees and credit any overpayment to Deposit Account Number 01-0035.

Respectfully submitted,

Date: September 5, 2006

Anthony J. Natoli

Registration number 36,223

Attorney for applicant

ABELMAN, FRAYNE & SCHWAB 666 Third Ave., 10th Floor New York, NY 10017-5621 (212) 949-9022

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